HISTORY FACILITY PROFILE

WALDEN MEADOWS HOME HEALTH 5521 SOUTH WALDEN MEADOWS PLACE MURRAY UT 84123 PROVIDER #: 467202

PARTICIPATION DATE: 11/07/2001

PHONE NUMBER: (801) 262-7397

TYPE ACTION: RECERTIFICATION TYPE FACILITY: OFFICIAL HEALTH

TYPE OWNERSHIP: PROPRIETARY

STATE'S REGION CODE: 001

COMPLIANCE STATUS: FACILITY MEETS REQUIREMENTS

CURRENT SURVEY REVISIT DATES -

PRIOR 3 PRIOR 2 PRIOR 1 CURRENT PLAN/DATE
SURVEY SURVEY SURVEY SURVEY OF CORRECTION
11/2001 10/08/2002

PROGRAM REQUIREMENTS

*** NO DEFICIENCIES WERE FOUND ***

TYPE OF DEFICIENCY	CURRENT SURVEY	PRIOR 1 SURVEY	PRIOR 2 SURVEY	PRIOR 3 SURVEY
CONDITION	0	0	0	0
STANDARD	0	0	0	0
REGIONAL OFFICE FLAG (INCLUDES COPS)	0	0	0	0
HEALTH TOTAL	0	0	0	0

STATUS OF DEFICIENT COPS

CURRENT SURVEY

NOT DEFICIENCY CORRECTED AFTER APPROVAL DEFICIENCY NOT REPEAT COP CORRECTED DEFICIENCY COP 0 0 0

COMPLAINT SURVEY INFORMATION

* NO COMPLAINT SURVEYS FOR THIS FACILITY

FMS SURVEY INFORMATION

* NO FMS SURVEYS FOR THIS FACILITY

C=DATE OF CORRECTION N=NO DATE GIVEN COP = CONDITION REQ = REQUIREMENT P=PLAN OF CORRECTION R=REFUSED TO CORRECT W=WAIVED F=FSES X=DEFICIENT